

PATENT ATTORNEY DOCKET NO.: UCSD1140-1

UNITED STATES PATENT AND TRADEMARK OFFICE RECEIVED

Applicant:

Robert K. Naviaux

Art Unit: 1614

MAY 0 6 2002

Application No.:

09/889,251

Examiner:

To Be Assigned

TECH CENTER 1600/2900

Filed: Title:

November 1, 2001

METHODS OF TREATMENT OF MITOCHONDRIAL DISORDERS

Box NON-FEE AMENDMENT Commissioner for Patents Washington, DC 20231

TRANSMITTAL SHEET

Sir:

Transmitted herewith for the above-identified application please find:

- 1. Preliminary Amendment (6 pages w/ Exhibit A);
- 2. Change of Attorney Address (1 page); and
- 3. Return Receipt Postcard.

CERTIFICATION UNDER 37 CFR §1.8

I hereby certify that the documents referred to as enclosed herein are being deposited with the United States Postal Service as first class mail on this date, April 18, 2002, in an envelope addressed to: Box NON-FEE AMENDMENT, Commissioner for Patents, Washington, D.C. 20231.

Aldon Griffis

(Name of Person Mailing Paper)

(Signature)

April 18, 2002

(Date

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The Fee for this Response is calculated as follows:

For	Claims Remaining After Amendment	Highest Number Previously Paid For	Extra Claims	Small Entity Rate	Large Entity Rate	Calculations
Total Claims	27	27	0	x \$09	x \$18	\$.00
Independent Claims	4	4	0	x \$42	x \$84	\$.00
Multiple Claims				\$140	\$280	\$.00
Basic Filing Fee		-		\$370	\$740	\$.00
					TOTAL FEE	\$.00

No fee is deemed necessary in connection with the filing of this paper. However, if a fee is required, the Commissioner is hereby authorized to charge any other fees associated with the filing submitted herewith, or credit any overpayments to Deposit Account No. 50-1355. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Date: April 18, 2002

Lisa A. Haile, J.D., Ph.D. Registration No. 38,347

Telephone: (858) 677-1456 Facsimile: (858) 677-1465

USPTO Customer Number 28213 GRAY CARY WARE & FREIDENRICH LLP 4365 Executive Drive, Suite 1100 San Diego, CA 92121-2133